P03 00000 39972

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Amend/cc

OCT 08 2019 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: Kilcrease Enterpris	ses, Inc.	
DOCUMENT NUM	P03000039972		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this mat	tter to the following:	
	Charles Kilcrease		
		Name of Contact Perso	n
	Kilcrease Enterprises, Inc.		
		Firm/ Company	
	1693 Turnstone Way		
		Address	
	Clermont, FL 34711		
		City/ State and Zip Cod	e
chuc	k@kcfl.pro		
	•	ed for future annual report	notification)
For further information	on concerning this matter, pleas	e call:	
Charles Kilerease		at (352	748-3600
Name	of Contact Person	at (Area Co) de & Daytime Telephone Number
			,
Enclosed is a check for	or the following amount made p	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div	iling Address endment Section ision of Corporations . Box 6327	Ameno Divisio	Address dment Section on of Corporations Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Kilcrease Enterprises, Inc.		
(Name of Corporation as currently	filed with the Florida Dept. of State)	
P03000039972		
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Torida Profit Corporation adopts the foll	owing amendment(s) to
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "C word "chartered," "professional association," or the abbreviation "F	o". A professional corporation name i	he abbreviation
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2016
		,
		<u>.</u>
		-1
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ss in Morida, enter the name of the	
ne i control actività di presi con la control di contro		
Name of New Registered Agent		<u></u>
(F)orida stree	et address)	
New Registered Office Address:	, Florida	
		(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the posit	ion.
Signatura of Nav. Pa	oistered Agent if changing	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	PT	John Doe	
X Remove	Ā	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1)Change	D	Richard L. Barner, Jr.	1202 SW 17th Street
Add			Ocala, FL 34471
x Remove			
2) Change			
Add			
Remove			
3)Change			
Add			
Remove			/
4) Change			
Add			
Reniove			
5) Change		- /	
Add			
Remove	/		
6)Change			
Add			
Remove			

f amending or adding additional Articles, Attach additional sheets, if necessary). (B	enter change(s) here: specific)		
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f an amendment provides for an exchange	, reclassification, or car	cellation of issued shar	es.
provisions for implementing the amendm	nt if not contained in t	ne amendment itself:	-
(if not applicable, indicate N/A)			
		···	
···			

	September 13, 2019	te a la la
The date of each amendment(s) addet this document was signed.	ioption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	clock does not meet the applicable statutory filing requirements, this date we partment of State's records.	ill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the amendment(s) flicient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
September	13, 2019	
Dated		
(By a d selected	rector, president or other officer – if directors or officers have not been I, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	Charles Kilcrease	
	(Typed or printed name of person signing)	
	COO	
	(Title of person signing)	